

Testimony to the Appropriations Committee Regarding the Governor's Proposed Midterm Budget Adjustments

February 17, 2012

Presented by Patricia Walden Vice President of Central Connecticut Senior Health Services Chair of LeadingAge Connecticut

Central Connecticut Senior Health Services, Inc. is a not-for-profit integrated healthcare system focused primarily on the senior population of the Greater Central Connecticut area and includes Southington Care Center, The Center for Healthy Aging, Mulberry Gardens of Southington, Orchards at Southington, and Jerome Home and Arbor Rose in New Britain.

LeadingAge Connecticut is a membership organization representing over 130 mission-driven and not-for-profit provider organizations serving older adults across the continuum of care including nursing homes, residential care homes, housing for the elderly, continuing care retirement communities, adult day centers, home care and assisted living agencies. LeadingAge Connecticut was formerly named the Connecticut Association of Not-for-profit Providers for the Aging (CANPFA).

Good evening Senator Harp, Representative Walker, and members of the Appropriations Committee. My name is Patricia Walden and I am the Vice President of Central Connecticut Senior Health Services and Chair of the Board of LeadingAge Connecticut (formerly known as CANPFA), an association of over 130 not-for-profit and mission-driven providers of aging services. I am joined by Mag Morelli, President of the association, and we are here tonight to speak to the issues of long term care as they are addressed in the Governor's midterm budget proposal.

LeadingAge Connecticut maintains a vision in which every community offers an integrated and coordinated continuum of high quality and affordable long term health care, housing and community based services. We are so encouraged that the Governor's proposal seems to have embraced this vision because now is the time for all of us to look toward innovative solutions, invest our resources, and begin to create the future of aging services.

LeadingAge Connecticut had previously proposed that the state allow long term care professionals the opportunity to transform the state's system of aging services one solution at a time. The Governor's "rebalancing" proposals begin to offer us the tools and resources that are needed, but we would like to work with the state to develop a practical process to facilitate the transformation. Specifically, for providers who are seeking to make innovative changes that are in line with our state's strategic initiatives, the state must create a collaborative and efficient regulatory and reimbursement review and approval process that is flexible, adaptive and receptive to individual providers' forward thinking ideas and planning. The formal process must be timely and coordinated across all relevant state agencies. This type of process would assist and encourage providers of the long term care continuum to adjust, modernize and diversify their models of care to address current and future consumer needs and expectations. The end result will be individual solutions that make the entire system stronger.

We have submitted written testimony on several aspects of the entire human services budget proposal and I would like to touch on a few of them right now. Specifically, I would like to comment on the long term care rightsizing initiative, investment in our infrastructure, and the Medicaid eligibility system crisis.

The Governor has laid out the first year of the rightsizing initiative in this budget proposal and let me begin by saying that we are very pleased that he has not abandoned the nursing home segment of the long term care continuum. The Governor has proposed resources to assist in modernizing, restructuring, diversifying and/or downsizing existing facilities and services to build a better model of care that will strengthen the full continuum and enable us to meet consumer demands, market needs and the goals of the state's long term care plan.

We cannot afford to continue to ignore the nursing home level of care. We need to actively plan and build a model and infrastructure of nursing home care that makes sense for the needs and demands of our long term care system moving forward. The proposed state and federal funding that has been dedicated to this effort will be of great help to many homes, but we also need to reinstate the fair rent component of the rate structure so as to encourage continued capital investment and improvement in all facilities.

Finally, we respectfully request that the legislature work quickly with the administration to find immediate solutions to address the current crisis in pending Medicaid applications. The eligibility system is grinding to a halt as consumers are unable to access services in the community and nursing home providers are incurring millions of dollars in bills owed by the state. We understand that the Commissioner of Social Services has instituted a plan to modernize the eligibility system and we are very optimistic that this will help the situation. However, the full implementation of these changes is at least a year and half away. This crisis simply cannot wait and is in need of immediate action.

In closing I would like to thank my colleagues who have joined me here tonight in support of this testimony. Together we would like to offer you our help as we all work to create an integrated and coordinated continuum of high quality and affordable long term health care and to expand the possibilities of aging.

Thank you and I would be glad to answer any questions.

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